

FIRST REGULAR SESSION

HOUSE BILL NO. 282

92ND GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES MOORE, GRAHAM, LOWE, SELBY, WALTON,
HOLAND (Co-sponsors), WALKER, RUESTMAN, SKAGGS AND SMITH (14).

Read 1st time January 23, 2003, and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

0955L.011

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to health insurance coverage for children's hearing aids.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be
2 known as section 376.1221, to read as follows:

376.1221. 1. Every health insurer and health benefit plan, as defined in section
2 376.1350, offering health benefit plans that are delivered, issued for delivery, continued or
3 renewed after January 1, 2004, shall provide coverage for hearing aids and associated
4 hearing evaluations and consumable supplies that are prescribed and dispensed by
5 appropriately licensed professionals to dependent children through age nineteen covered
6 under a policy, contract, or plan.

7 2. The hearing aids covered under this section shall:

8 (1) Be an electronic wearable device designed for the purpose of aiding or
9 compensating for human hearing loss and any parts, attachments, or accessories, including
10 earmolds;

11 (2) Be of a design and circuitry to optimize audibility and listening skills in the
12 environment commonly experienced by children; and

13 (3) Have multiple-band wide dynamic range compression and direct audio input
14 compatibility.

15 3. The coverage provided by this section shall include coverage for replacement
16 hearing aids for the child at least once every three years.

17 4. A health insurer or health benefit plan subject to this section shall not cap the
18 benefit payable for hearing aids to less than one thousand two hundred fifty dollars per

19 **hearing aid for each ear with a hearing loss. An insured or enrollee may choose a hearing**
20 **aid that costs more than the benefit payable and may pay the difference between the cost**
21 **of the hearing aid and the benefit payable without financial or contractual penalty to the**
22 **provider of the hearing aid.**

23 **5. Nothing in this section shall prohibit a health insurer or health benefit plan from**
24 **providing coverage that is greater than or more favorable to enrollees than the coverage**
25 **provided by this section.**

26 **6. The health care service required by this section shall not be subject to a**
27 **deductible or co-payment that exceeds twenty percent of the actual covered service costs.**
28 **No health insurer or health benefit plan subject to this section shall request or require**
29 **hearing acuity information from or about persons applying for coverage.**

30 **7. This section shall not apply to a supplemental insurance policy, including a life**
31 **care contract, accident-only policy, specified disease policy, hospital policy providing a**
32 **fixed daily benefit only, Medicare supplement policy, long-term care policy, short-term**
33 **major medical policies of six months or less duration, or any other supplemental policy as**
34 **determined by the director of the department of insurance.**

35 **8. The director of the department of insurance may promulgate rules to implement**
36 **the provisions of this section. No rule or portion of a rule promulgated under the authority**
37 **of this section shall become effective unless it has been promulgated pursuant to chapter**
38 **536, RSMo.**